

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	W. W. B. B. B.	20	20-06-01 5/3
FORMALITY REVIEW	TL		17-15-10
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		57/02	
2		57/02	
3		57/02	
4		57/02	
5		57/02	
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35		57/02	
36		57/02	
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38		57/02	
39	+	✓	
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41	+	N	
42	+	N	
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48	+	N	
49	+	N	
50	+	N	

Claim	Final	Original	Date
51		57/02	
52		57/02	
53		57/02	
54		57/02	
55		57/02	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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